



AUCD LEADERSHIP ACADEMY

Shaping the future of disability

The Association of University Centers on Disability (AUCD) is proud to present the 2nd Annual AUCD LEADERSHIP ACADEMY

WHAT IS THE AUCD LEADERSHIP ACADEMY?

The AUCD Leadership Academy is a week-long in-person program, paired with a year of pre and post interactions designed to enhance the skills of current and emerging leaders from disability networks to build coalitions to improve systems of supports and services. The Leadership Academy seeks participants from UCEDDs, LENDs, and their disability partners to come together to immerse themselves for a week of study, shared experiences, self-evaluation, and skill development. Participants will engage with a diverse cohort of learners, Academy staff, and local coaches in the year following the experience. The Academy will focus on the exploration of shared values and commitments to civil and human rights, assessments of personal and leadership strengths, skills in building partnerships to achieve collective impact, and establishing personal and professional leadership goals.

WHERE WILL THE AUCD LEADERSHIP ACADEMY BE LOCATED?

The AUCD Leadership Academy will be held at Georgia State University College of Law in Atlanta, GA.

WHEN WILL THE AUCD LEADERSHIP ACADEMY TAKE PLACE?

June 24-29, 2018.

Applicant Accommodations and Support

To ensure equal opportunity and access to the AUCD Leadership Academy that will provide reasonable auxiliary aids, services, language translation, and alternative formats to applicants and trainees. Please send an email to aucdacademy@gsu.edu or call (404) 413-9334 or fax (404) 413-1012. For more information, please visit www.cld-gsu.org.

Application deadline: March 2, 2018 by 5:00pm (EST)

Applicant Profile

Name: _____

	First	Middle	Last
Current Address: _____	Street	City	State
			Zip code

Mailing Address (if different): _____

	Street	City	State
			Zip code

Phone Number (primary): _____ Phone Number (secondary): _____

Primary Email address: _____ Secondary Email address: _____

Organization Name: _____

Organization Mailing Address: _____

	Street	City	State
			Zip code

Applicant's Supervisor's Name: _____

Applicant's Supervisor's Email Address: _____

Emergency Contact Information

Primary Contact Name: _____

	First	Middle	Last
Emergency Contact Current Address: _____	Street	City	State
			Zip code

Phone Number (primary): _____ Phone Number (secondary): _____

Primary Email address: _____ Secondary Email address: _____

Secondary Contact Name: _____

	First	Middle	Last
Secondary Contact Current Address: _____	Street	City	State
			Zip code

Phone Number (primary): _____ Phone Number (secondary): _____

Primary Email address: _____ Secondary Email address: _____

DEMOGRAPHIC INFORMATION

Completion of this section of the application is voluntary. The AUCD Leadership Academy encourages that you consider providing a response to these questions. No individual applicant selections are made based on this information. By providing this information, you will help us to ensure that participants represent a broad cross-section of demographics. The AUCD Leadership Academy will treat this information as confidential to the fullest extent allowed by law.

Gender

- Male
- Female
- Other _____ (please identify)

Age: _____

Ethnicity (Please select)

- Hispanic or Latino- a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- Non-Hispanic or Latino

Race and (Please select all that apply)

- White- - a person having origins in any of the original peoples of Europe, the Middle East, or North Africa
- Black or African American- - a person having origins in any of the black racial groups of Africa.
- Native American or American Indian- a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific islands.
- Asian / Pacific Islander- - a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, or Vietnam.
- American Indian or Alaska Native - a person having origins in any of the original peoples of North or South America (including Central America), and who maintains tribal affiliation or community attachment.
- Other _____

Disability Status

Completion of this section of the application is voluntary. The AUCD Leadership Academy encourages that you consider providing a response to these questions. No individual applicant selections are made based on this information. By providing this information, you will help us to ensure that participants represent a broad cross-section of demographics. The AUCD Leadership Academy will treat this information as confidential to the fullest extent allowed by law.

Do you identify as having an intellectual or developmental disability?

- Yes
- No

Do you identify as having a disability other than an intellectual or developmental disability?

- Yes
- No
- None of the conditions listed above apply to me.
- I do not wish to answer questions regarding disability/health conditions.

Do you identify as having a family member with a disability?

- Yes
- No

Accommodations or Supports

Please list any accommodations or supports that would facilitate your participation in to the AUCD Leadership Academy. Please note any dietary restrictions as well.

Application Instructions

The AUCD Leadership Academy aims to train participants with a diverse range of experiences, backgrounds, and perspectives. Each applicant is required to compose a brief introduction of yourself by providing the information below.

1. Please provide a letter of support from a senior agency or organization representative in which you are currently a) employed or b) where you previously or currently volunteer. We would like to know that your organization supports your participation. Please provide a short statement from your agency or organization clearly stating their support of you throughout this training program. This statement must be received, along with the application by the application deadline (250 words in length).
2. Please submit your resume or curriculum vitae . The resume or vitae should include your educational history along with any certificates obtained.
3. Please attach a biographical statement (250 words in length).

In a separate document, please provide responses to the following prompts. Each response should not be more than 250 words in length.

1. Describe your leadership roles and experiences (formal and informal).
2. What are your personal and professional goals (short and long term)? How will being involved in the AUCD Leadership Academy help you to achieve those goals? Please include information about your experience with organizations, communities, and persons with intellectual and developmental disabilities.
3. Why are you interested in applying to the AUCD Leadership Academy?
4. How do you expect the AUCD Leadership Academy to influence your work?

Applicant Signature _____ Date _____

Submit completed application and documents to aucdacademy@gsu.edu or fax to (404) 413-1012 by **March 02, 2018 by 5:00pm (EST)**